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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/511,242			ing Date 23/2005	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY	OTHER THAN SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A	`		N/A		N/A			N/A	
TO ⁻ (37	ΓAL CLAIMS CFR 1.16(i))		mir	minus 20 = *				x \$ =		OR	x \$ =	
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *		*			x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addi	If the specification and of sheets of paper, the app is \$250 (\$125 for small additional 50 sheets or 1 35 U.S.C. 41(a)(1)(G) a			oplication size fee due I entity) for each fraction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If t	the difference in col	r "0" in colum		TOTAL			TOTAL					
APPLICATION AS AMENDED – PART II OTHER TH (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL EN											ER THAN ALL ENTITY	
AMENDMENT	09/19/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 47	Minus	** 40		= 7		x \$ =		OR	X \$50=	350
	Independent (37 CFR 1.16(h))	* 4	Minus	***3		= 1		x \$ =		OR	X \$210=	210
	Application Size Fee (37 CFR 1.16(s))											
′	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	560
		(Column 1)		(Column 2	2)	(Column 3)				_		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEF PREVIOUS PAID FOI	₹ SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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